



Media Release

5 November 2020

PBS Schedule review to ensure access to medicines for palliative care patients

A decision to review the Pharmaceutical Benefits Scheme (PBS) Palliative Care Schedule has been welcomed by Palliative Care Australia (PCA) and the Royal College of General Practitioners (RACGP) and described as an important step in ensuring palliative care patients are provided flexible access to the medicines they need.

The announcement by the Pharmaceutical Benefits Advisory Committee (PBAC) follows submissions by PCA, the RACGP and others, concerning the retention, deletion, and amendment of items on the Palliative Care Schedule.

In a statement, PBAC acknowledged that aligning the Palliative Care Schedule opioid listings with the recent changes to the General PBS Schedule would support the “appropriate prescribing and use of opioids” while continuing its support of the quality use of opioids without impact to the appropriate supply of opioids to palliative patients.

Opioid medicines are an essential element of pain and symptom management strategies, when used responsibly by health professionals, to support palliative care patients.

PCA National Clinical Advisor and Palliative Care Nurse Practitioner Kate Reed says governments and regulators generally acknowledge this reality, but says it is vital to ensure the rules and restrictions surrounding opioids always reflect the current evidence-based practices.

She believes the review is a step in the right direction to provide better pain management for non-cancer palliative care patients.

“All Australians receiving palliative care must be able to access necessary opioids to manage and prevent suffering from uncontrolled pain and other symptoms. It’s therefore vital that we increase the understanding of appropriate use of opioids within the Australian palliative care context,” Ms Reed said.

Acting RACGP President Associate Professor Ayman Shenouda said that the decision by Pharmaceutical Benefits Advisory Committee was a positive step forward for patient care.

“As a GP I have treated many patients receiving care at the end of their life, we must do all we can to help them live their last moments with as much dignity and comfort as possible.

“A key component of that is ensuring that these patients do not incur high costs of care due to being denied PBS subsidies or access to the recommended medicines. It is also vital that they have access to the right types of opioids when they need them.

“When considering the PBS’s Palliative Care Schedule, we must think carefully about how to relieve distressing symptoms in patients in a variety of challenging circumstances. That includes those who have difficulty swallowing, people in remote Indigenous communities or patients intolerant to some opioids like morphine.

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“It is most welcome news that PBAC has acknowledged that aligning the opioid listings with the recent changes to the PBS Schedule would support the appropriate scheduling and use of these drugs.”

PCA Chair Professor Meera Agar said Palliative Care Australia has the expertise to advise governments on the review of the PBS Palliative Care Schedule.

“Palliative Care Australia has released a [position statement](#) on sustainable access to prescription opioids in palliative care last year, which has been endorsed by several palliative care and healthcare organisations. We look forward to continuing to work closely with PBAC and contributing to a successful review of the PBS Palliative Care Schedule,” Professor Agar said.